Application Number CLAIMS ONLY Filing Date Applicant(s). May be used for additional claims or amendments . AS FILED AFTER FIRST AMENDMENT Indep Depend AFTER SECOND AMENDMENT Indep Depend Indep Depend Indep Depend Indep Depend Depend 51 52 58 59 60 61 10 12 13 14 15 16 62 63 64 65 17 18 19 66 67 68 69 70 71 72 73. 74 .20 21 22 23 24 75 76 .27 28 29 30 31 32 77 78 79 81 82 83 84 85 86 • 37 38 39 87 88 40 • 41 89 90 42 91 43 44 92 93 94 46 17 48 25 96 97 99 100 50 Total Indep Total Indep Depend Total Claims Depend Total Claims